

Immunology Innate, Adaptive, MHC Lecture 7

Dr. Mohammad Odaibat

Department of Microbiology and Pathology

Faculty of Medicine, Mutah University



Introduction

Immune system

Innate Immunity

- Non-specific, general
- Immediate response
- No immunological memory

Adaptive Immunity

- Specific to antigen
- Non-immediate response
- Immunological memory after exposure

First line defense:

- External barriers

Second line defense

Humoral Immunity:

- Antibodies
- Interleukins

Cellular Immunity:

- T cells
- B cells

Humoral Immunity:

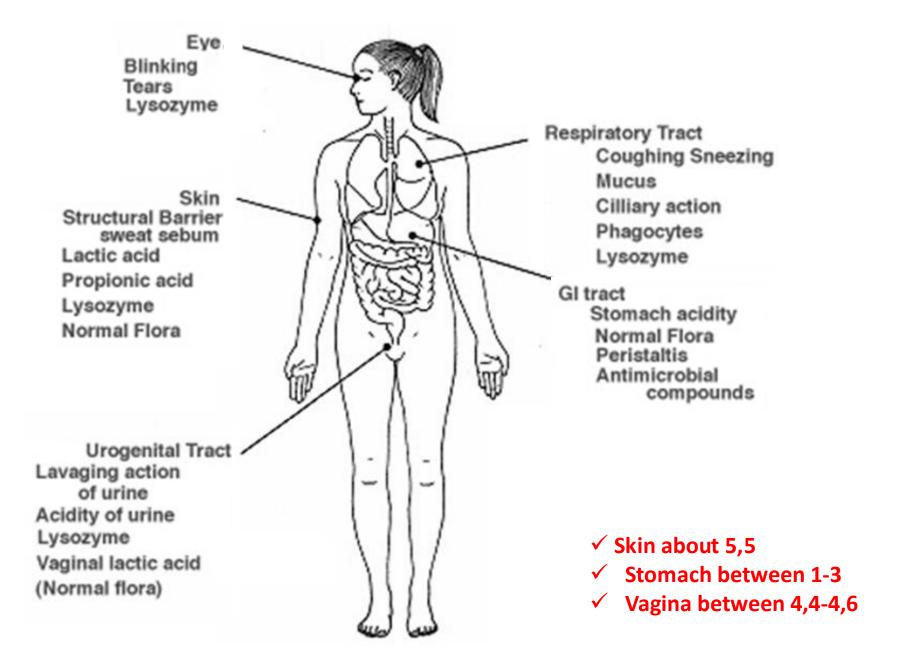
- Complement
- Interleukins
- Enzymes

Cellular Immunity:

Phagocytes

Natural killer cells

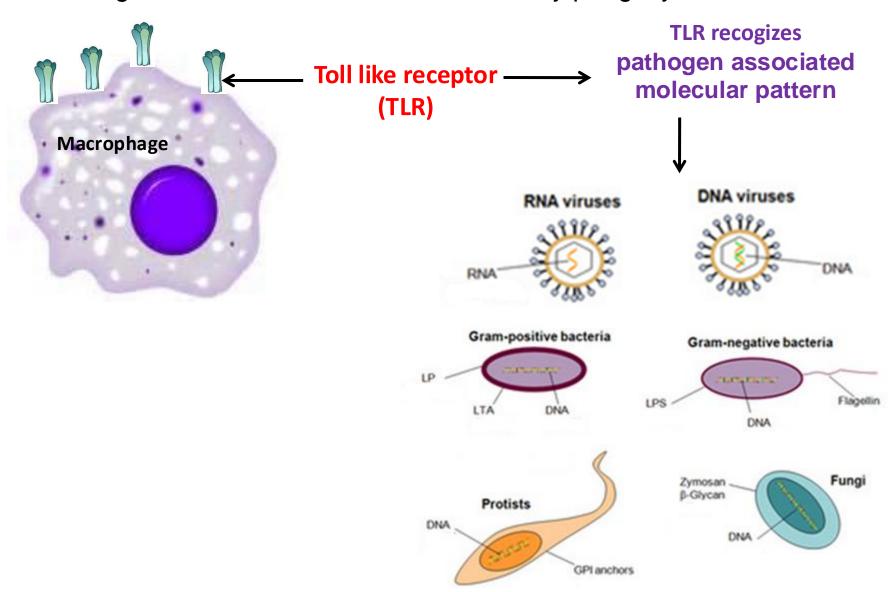
Innate immunity



Innate immunity

Stages Phagocytosis:

1. Recognition and attachment of microbes by phagocytes

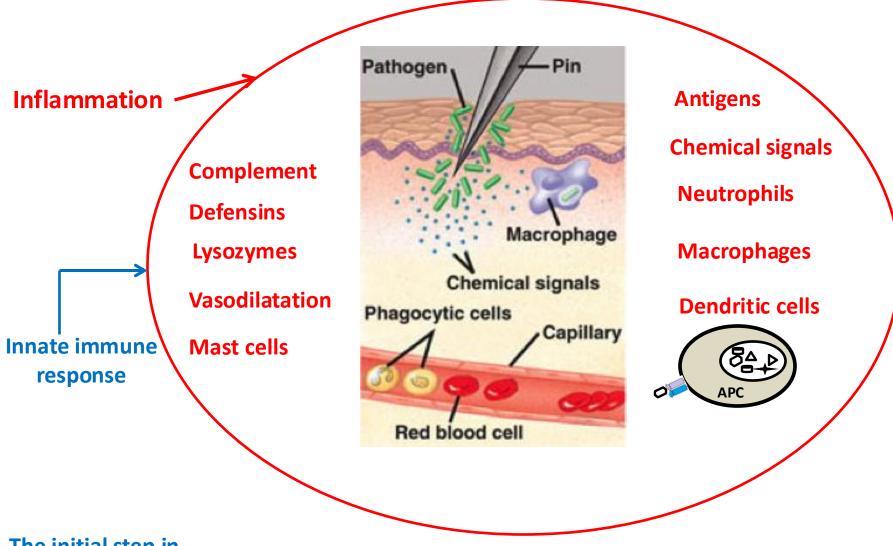


Objectives

- The definition and the importance of the adaptive immunity
- Understanding the arms of the adaptive immunity:
 - √ Humoral immunity
 - ✓ Cell-mediated immunity
- The importance of T- helper cells in communicating and activating immune cells
- Function and mechanism of action of TH1 & TH2 cells
- Function and mechanism of action of T cytotoxic cells

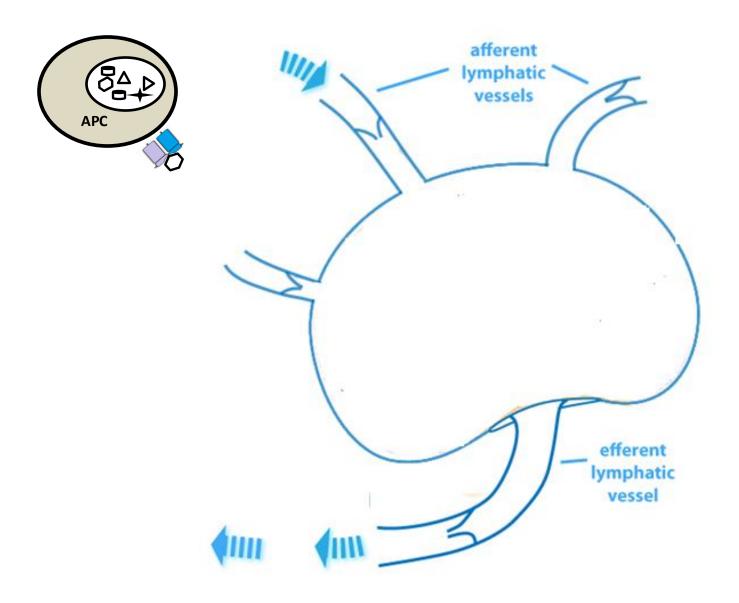
Introduction

Initiation of innate and acquired immunity



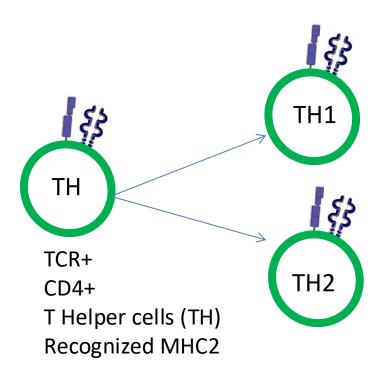
The initial step in triggering adaptive immunity

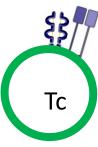
To the secondary lymphoid organs



What will happen inside the lymph node?

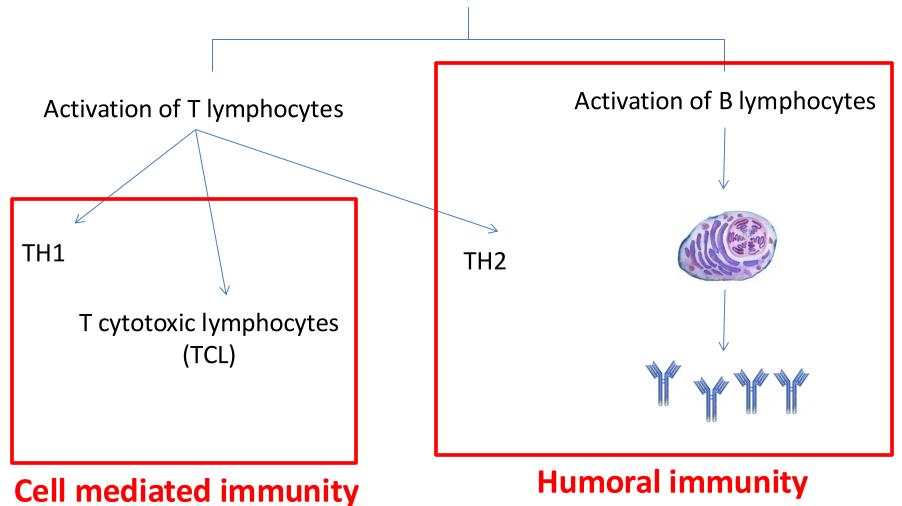
T lymphocytes

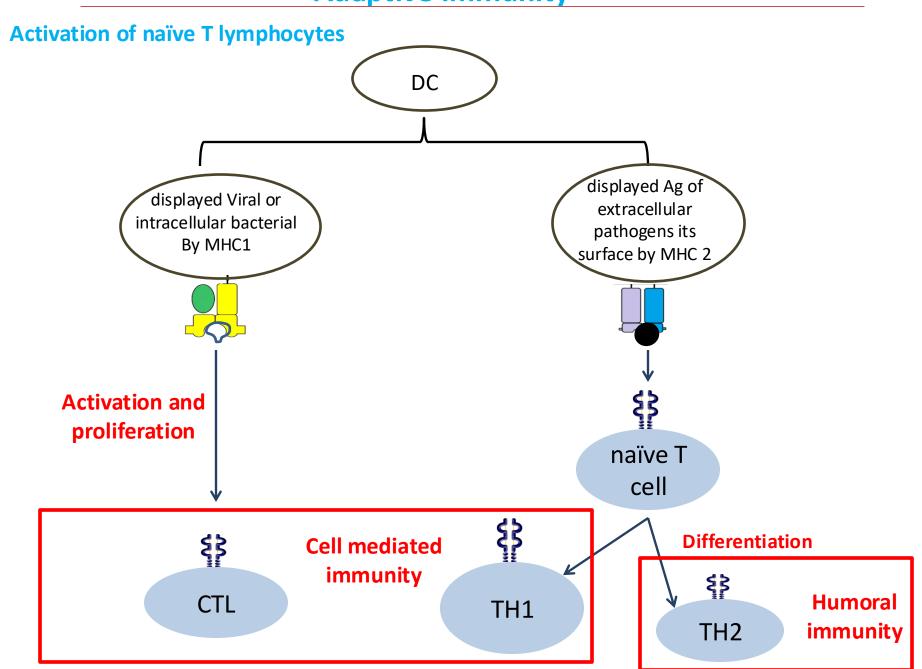




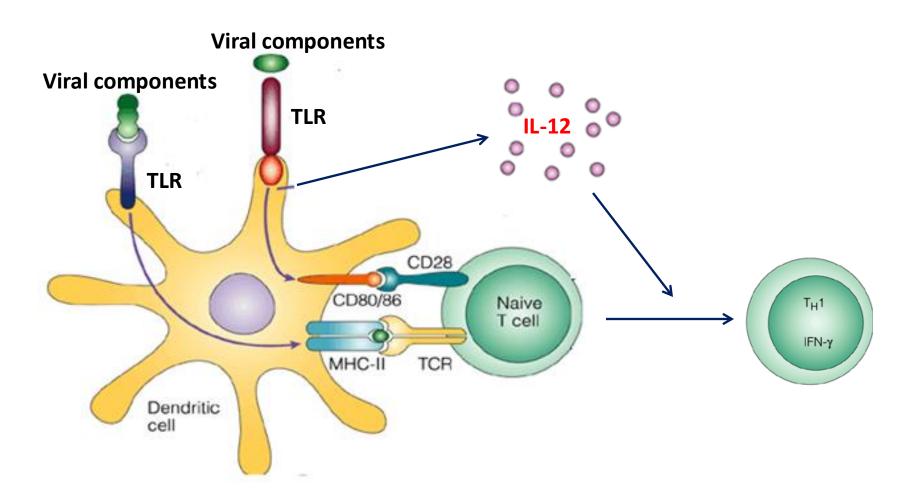
TCR+ CD8+ T cytotoxic cells (Tc) Recognized MHC1

What will happen inside the lymph node?

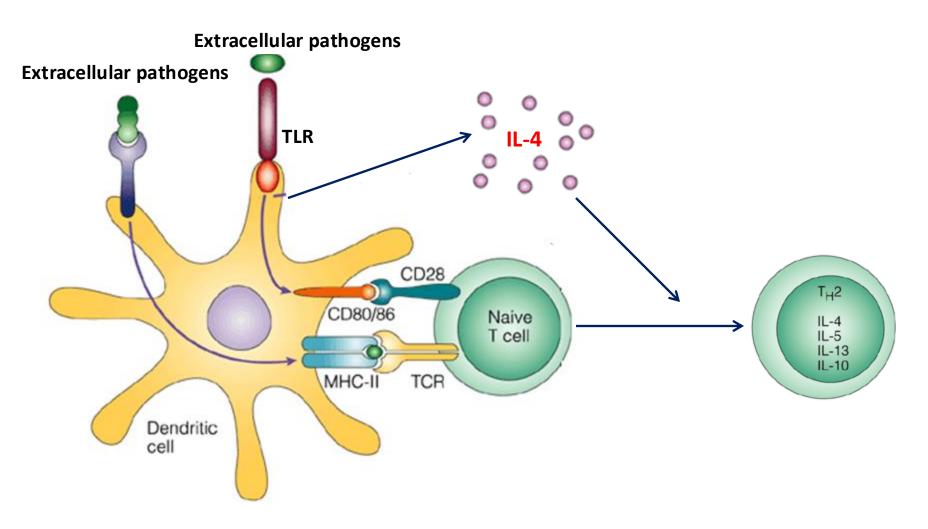




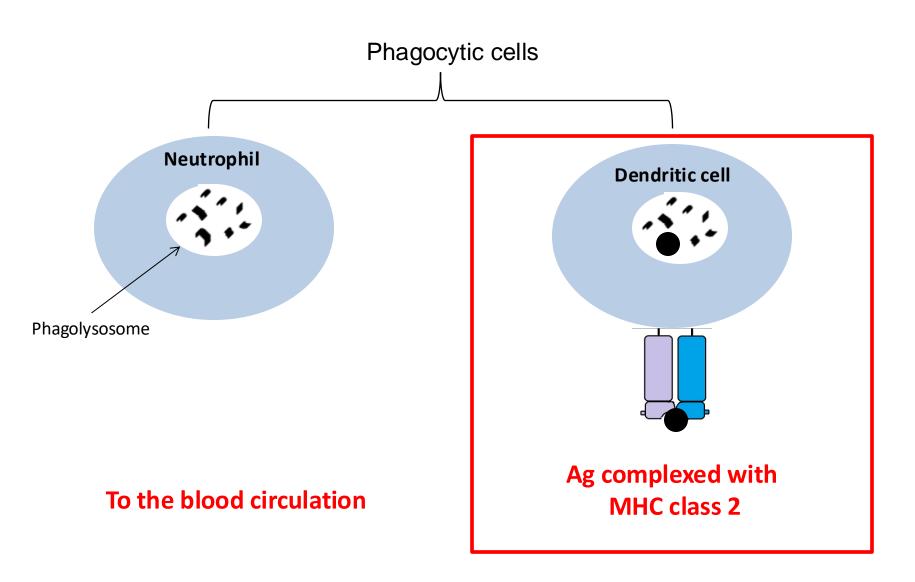
What determines the naïve T cell differentiation into Th1?



What determines the naïve T cell differentiation into Th2?

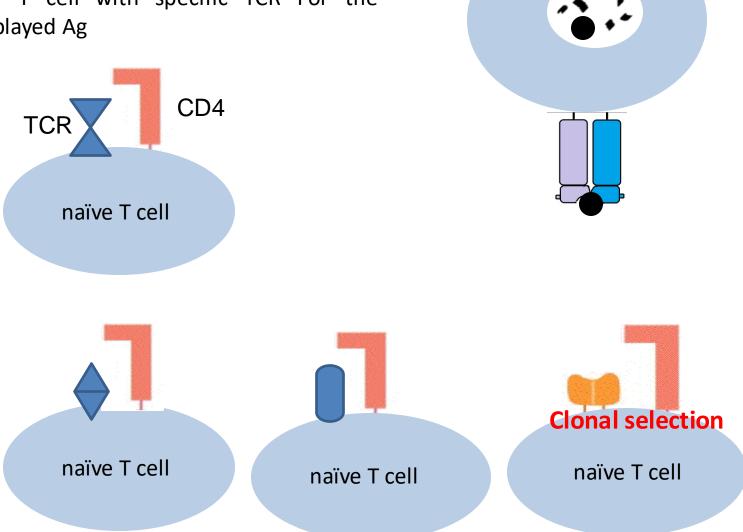


Humoral Arm of Adaptive Immunity

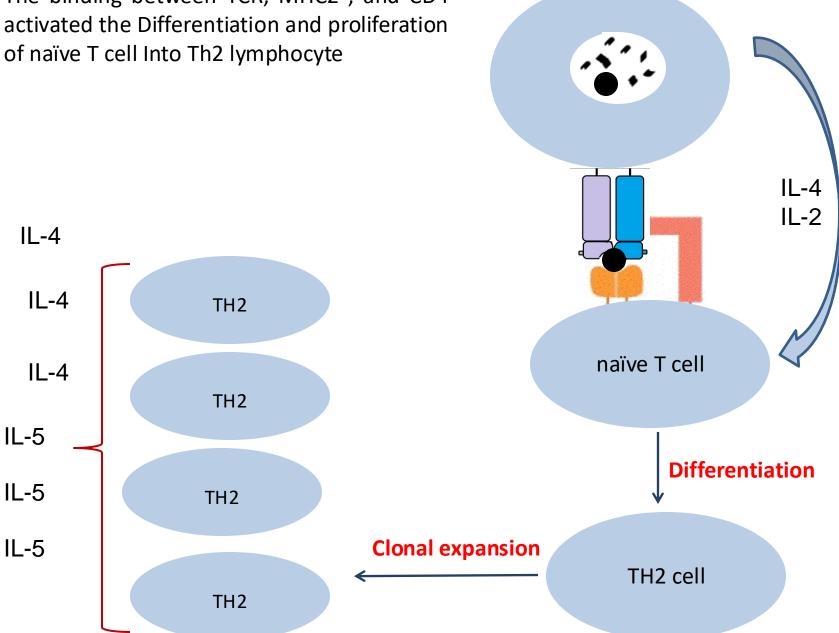


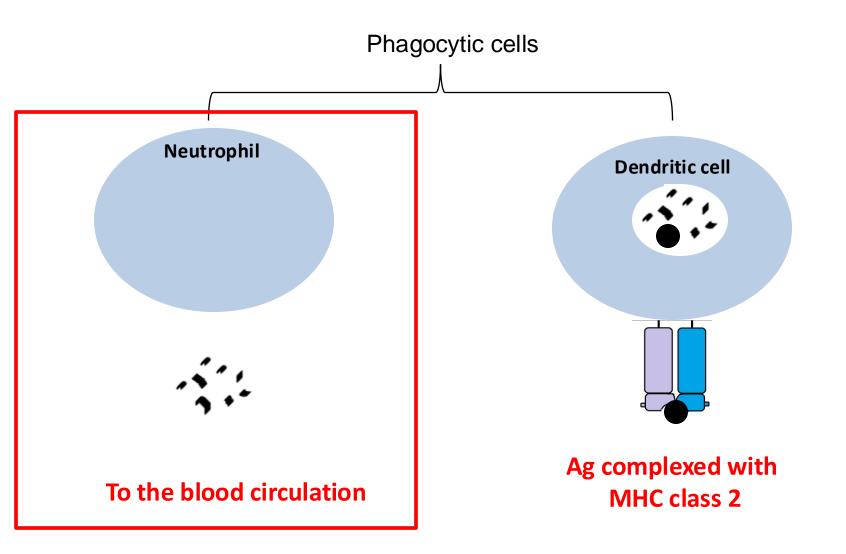
Dendritic cell

In the lymph node, dendritic cell Start presenting Ag to naïve T cells until Finding one T cell with specific TCR For the displayed Ag

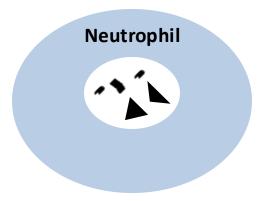


The binding between TCR, MHC2, and CD4

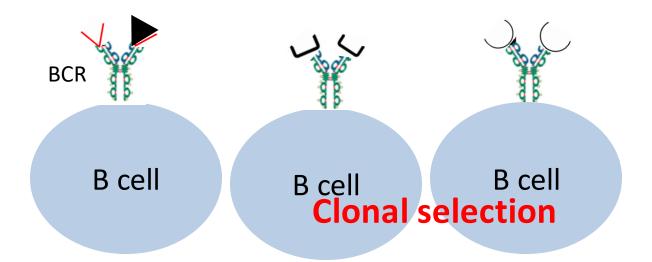


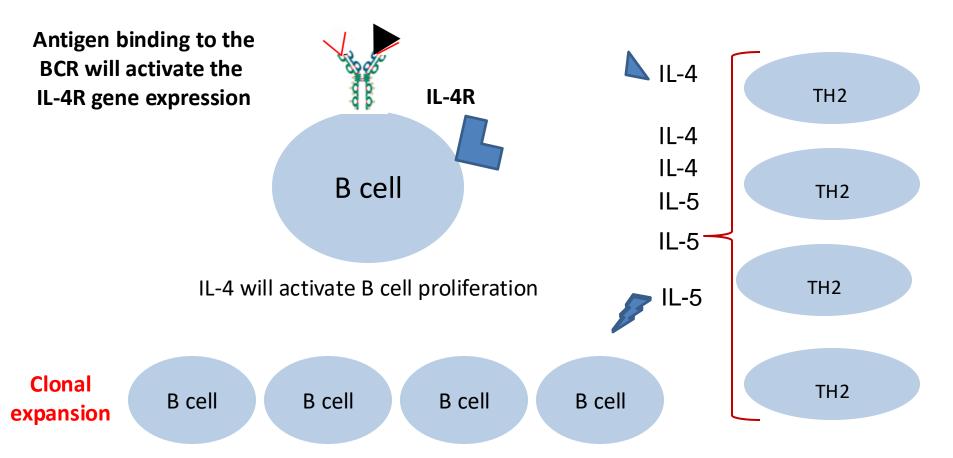


The free antigens that were released from neutrophils will activate naïve B cells

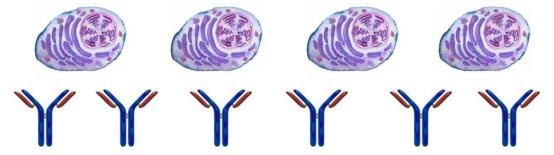


Reaching lymph node via lymph



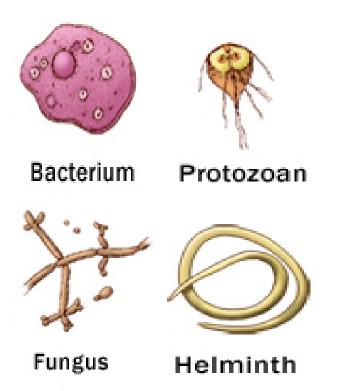


IL-5 will activate B cell differentiation into plasma cells



Cellular immunity vs. Humoral immunity

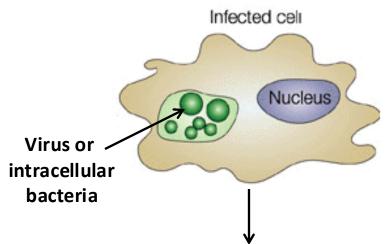
Extracellular pathogens



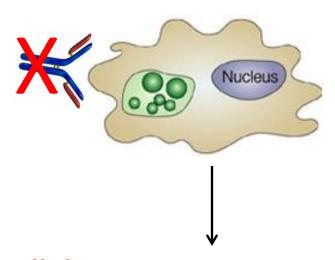
The body can defend itself against the extracellular pathogens by complement, antibodies

Humoral immunity

Intracellular pathogens



Complement & antibodies are ineffective in fighting intracellular pathogens



Cellular immunity is activated

Cellular Arm of Adaptive Immunity

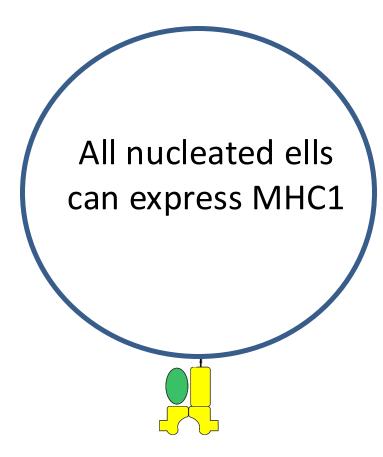
Types

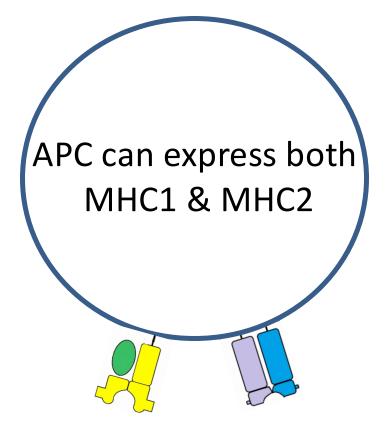
CD8+ cytotoxic T lymphocytes (CTLs) mediated cell lysis

immunity independent of antibody and subsequent destruction of cells bearing the antigen

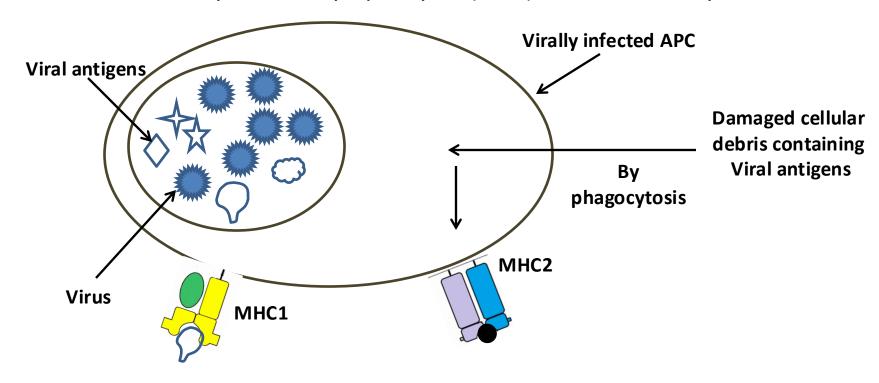
Macrophage activation by TH1 cells

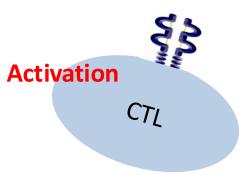
dependent the secretion by T cells of cytokines that enhance the ability of phagocytes to eliminate the phagocytized pathogens





CD8+ cytotoxic T lymphocytes (CTLs) mediated cell lysis



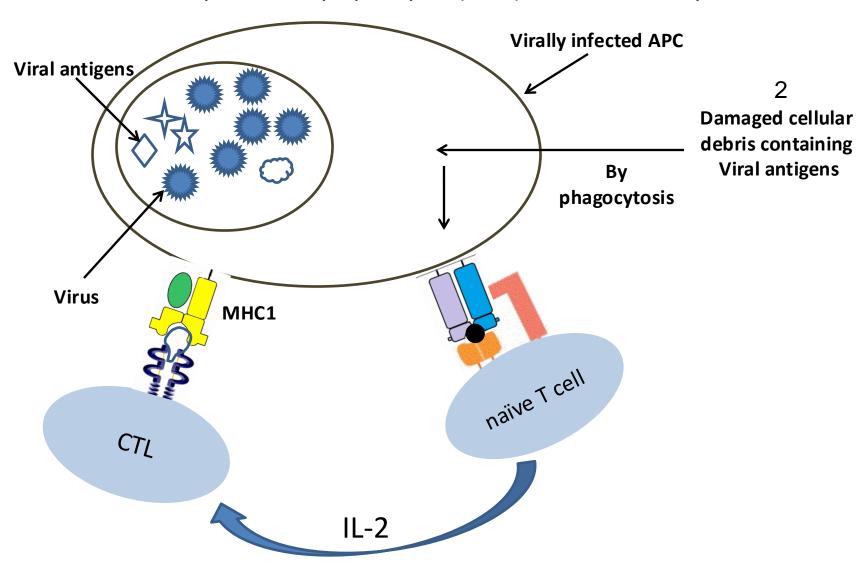


Naïve T cell with specific TCR for the Displayed Ag

CTL with TCR specific for the displayed Ag

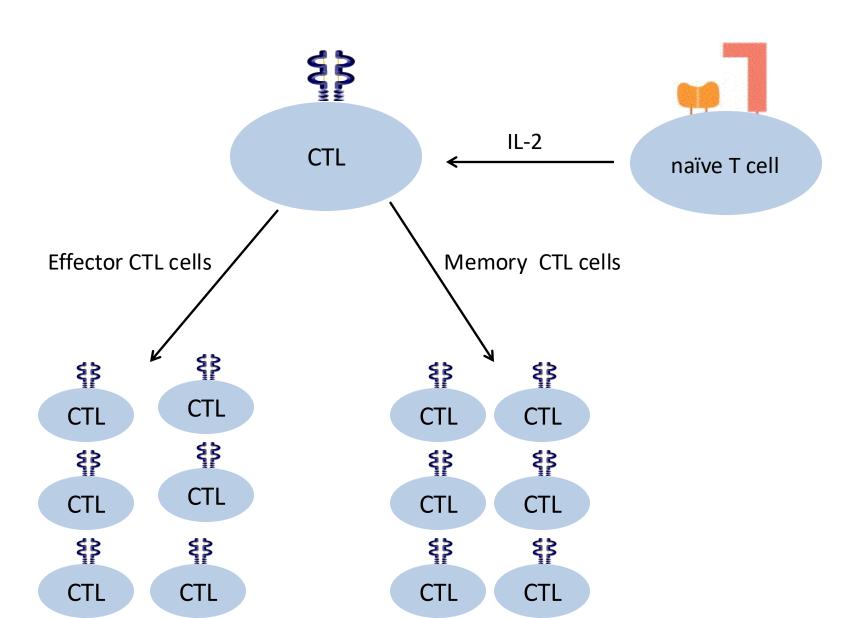


CD8+ cytotoxic T lymphocytes (CTLs) mediated cell lysis

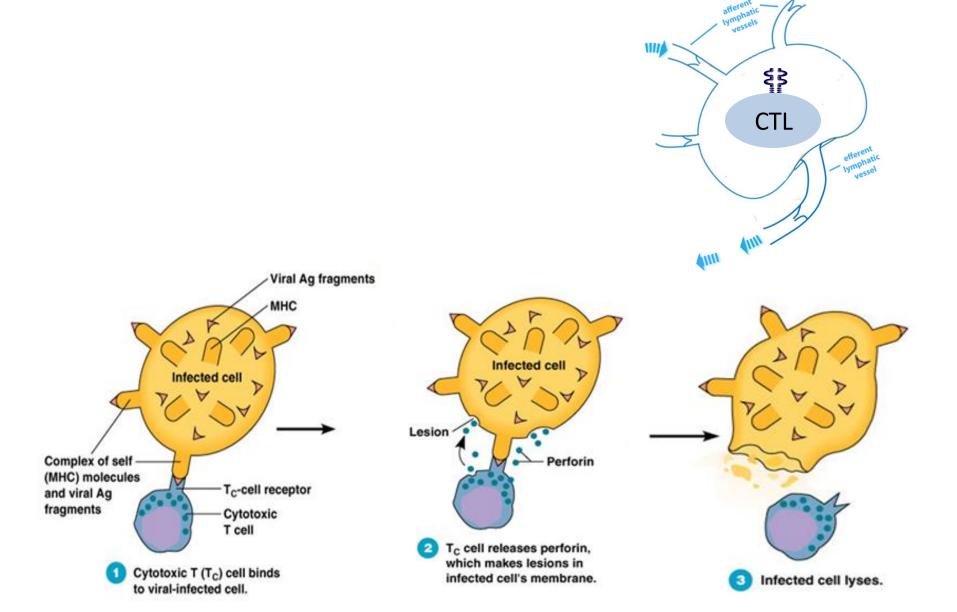


Proliferation and differentiation

CD8+ cytotoxic T lymphocytes (CTLs) mediated cell lysis



CTLs mediate cell lysis of virally infected cells



Innate vs. Adaptive Immunity

Innate immunity	Adaptive immunity
• general protection (not antigen- specific)	• highly specific for a particular pathogen (antigen-specific)
 early phase of host response to pathogens without requiring prior exposure 	 late phase response of antigen- specific lymphocytes to antigens
• immediate maximal response	• lag time between exposure and maximal response
 does not alter on repeated exposure (no immunological memory) 	 improves with each successive exposure (immunological memory)
* (rapid, non-specific, no memory)	* (slower, specific, diverse, memory)

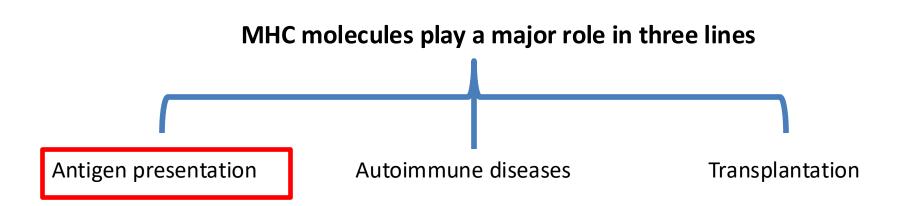


Major Histocompatibility Complex

Introduction

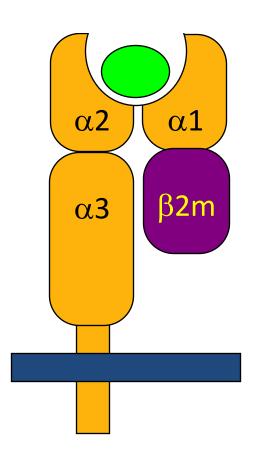
Definition of the MHC

Is a set of cell surface molecules encoded by a large gene family which controls a major part of the immune system in all vertebrates



Class I MHC Molecule

Overall structure of MHC class I molecules



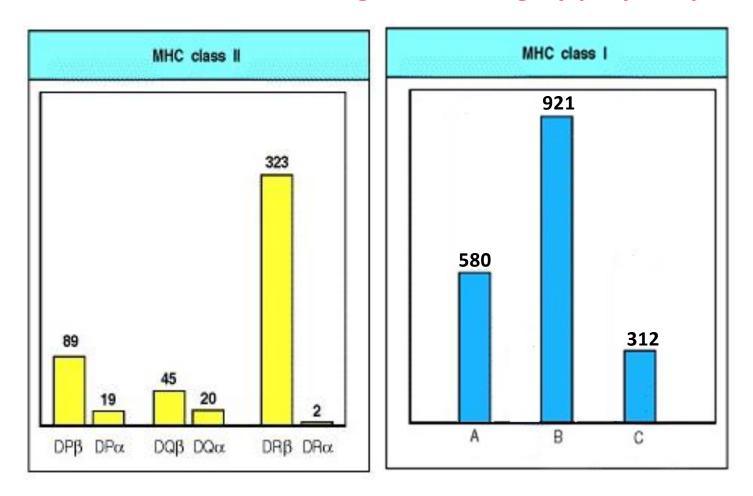
MHC-encoded α -chain of 43kDa

 α -chain anchored to the cell membrane

Peptide antigen binds in a groove formed From $\alpha 1$ and $\alpha 2$ domains

 β 2-microglobulin, 12kDa, non-MHC encoded, non-transmembrane, non covalently bound to α -chain

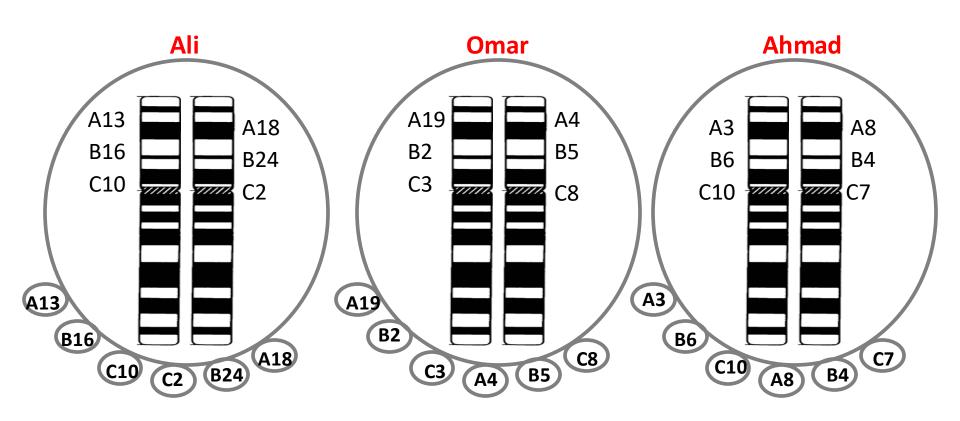
Human MHC Class 1 and 2 genes are highly polymorphic



- Each MHC locus has many alleles.
- The difference in the inheritance of MHC molecules among individuals is due to the presence of a big number of MHC alleles

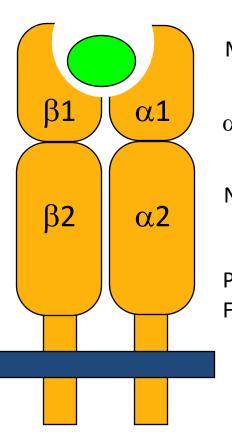
MHC-I

Inheritance of MHC-I



MHC-II

Overall structure of MHC class II molecules



MHC-encoded, α -chain and a β -chain

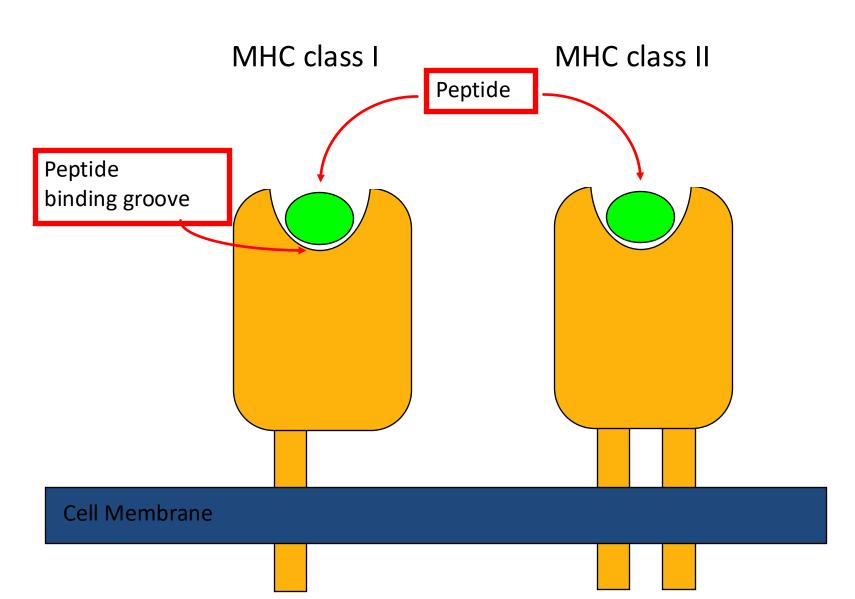
 α and β chains anchored to the cell membrane

No β -2 microglobulin

Peptide antigen binds in a groove formed From $\alpha 1$ and $\beta 1$ domains

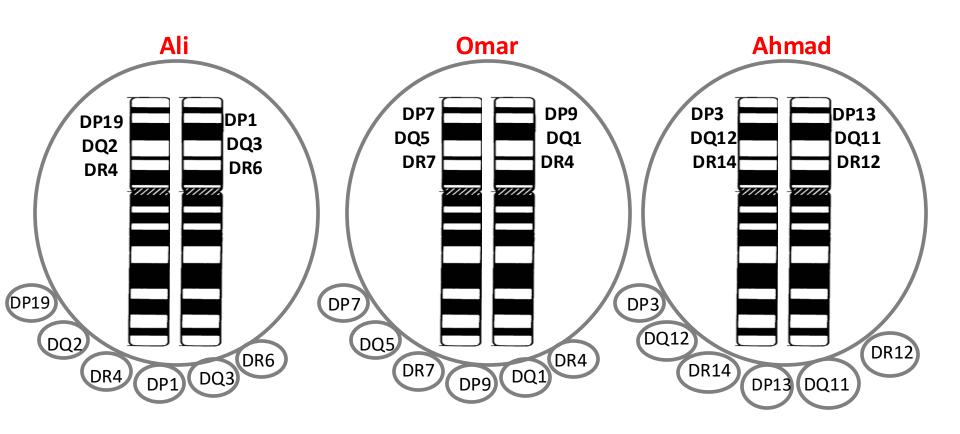
MHC-II

MHC-I vs. MHC-II

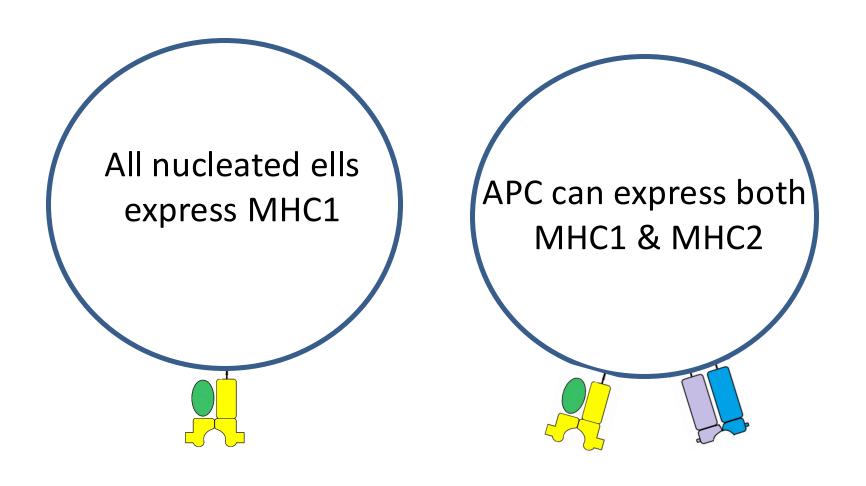


MHC-II

Inheritance of MHC-II



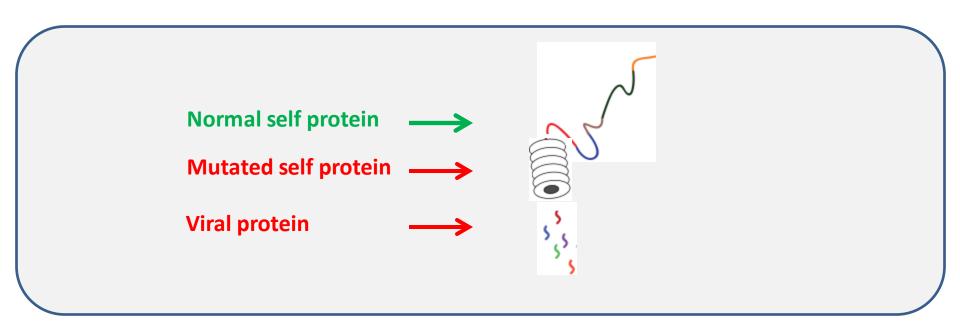
Expression of MHC molecules



Types of endogenous proteins synthesized in the human cells including:

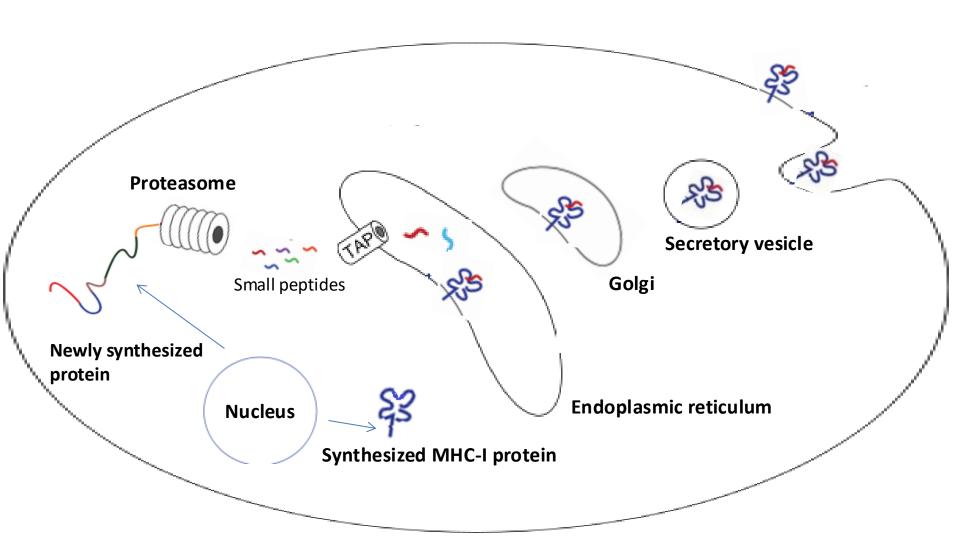
- 1. The normally synthesized cellular proteins
- 2. The mutated cellular proteins
- 3. The viral proteins (antigens)

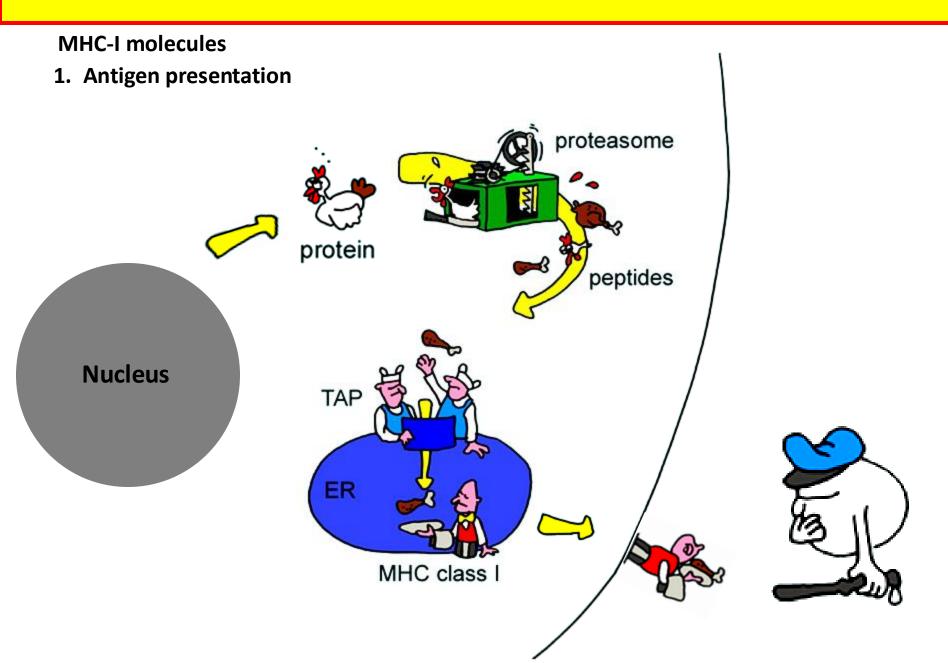
A small amount of these proteins are directed to the proteosome in which these proteins are degraded into short peptides in order to be complexed with the MHC-I molecules. Then these proteins with MHC-I are expressed on the surface of the cell to be presented to the cytotoxic T-cells (CTLs)



MHC-I molecules

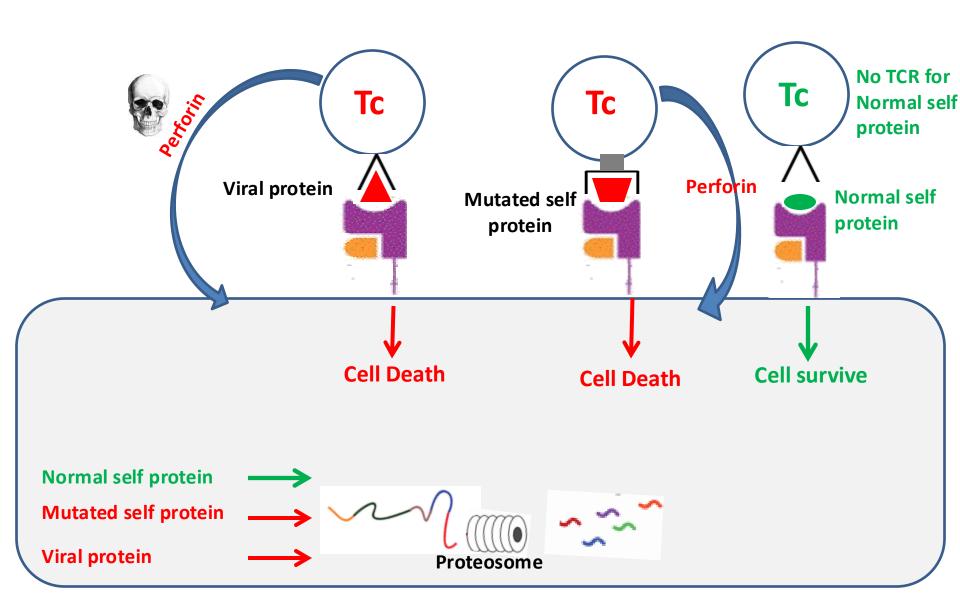
1. Antigen presentation



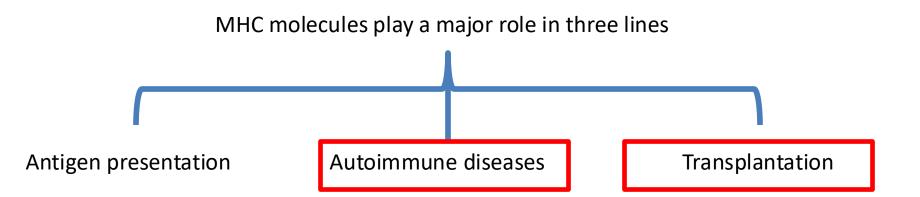


MHC-I molecules

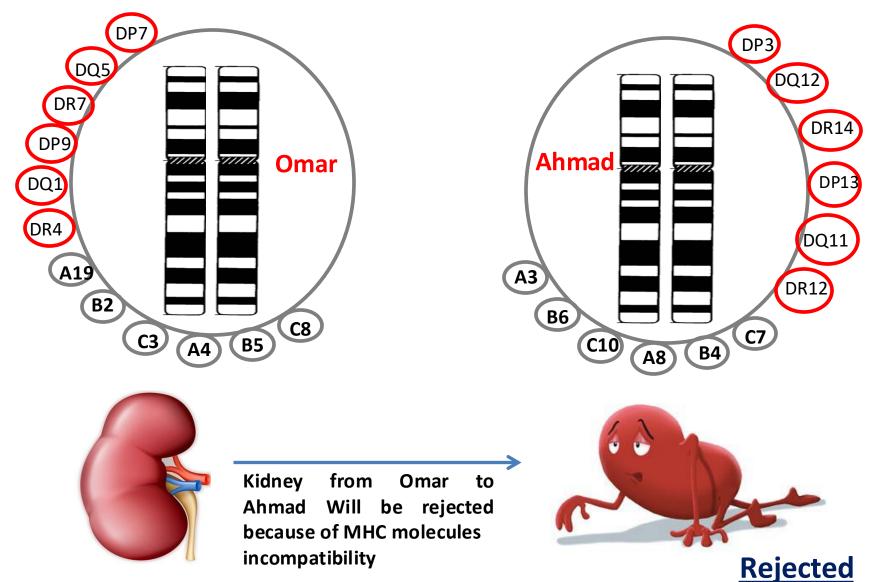
1. Antigen presentation to CTL to check the normal expression of cellular proteins



Biological Importance of MHC



2- Transplantation



2- Transplantation

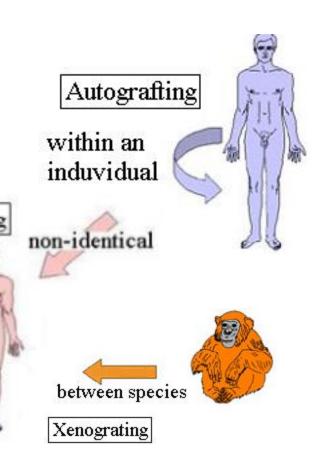
Methods of Transplantation:

May take place between:

different parts of the same organism (autografting)

*different organisms of the sam Allografting species (allografting)

different species (xenografting)

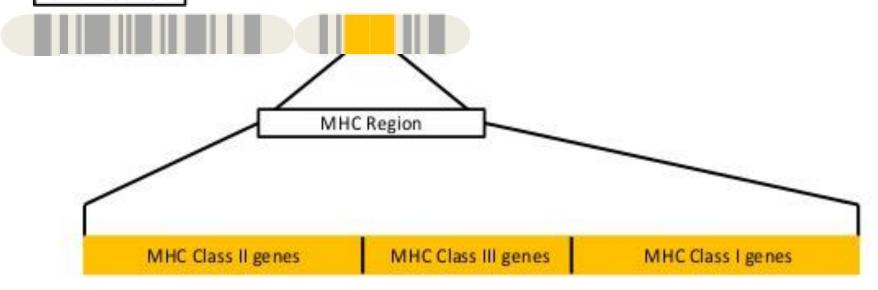


Matching and cross-matching

- Matching: finding a donor who shares the HLA antigens of the recipient, to minimize antigen differences
 - requires donor and recipient antigens to be identified
- Cross-matching: testing the SERUM of the recipient for antibodies against the donor antigens

MHC and associated diseases

Chromosome 6



- Multiple Sclerosis
- Psoriasis
- Systemic Lupus
- Asthma
- Childhood Acute Lymphoblastic

Leukemia (ALL)

- HIV-related disease
- Thyroid Carcinoma
- Nephropathy
- Kawasaki disease
- Celiac Disease

- Leprosy
- Multiple Sclerosis
- Lymphoid Leukemia
- Rh(D) isoimmunization
- Psoriasis
- Ankylosing spondylitis
- Hemophilia with synovitis
- Malaria
- Susceptibility or Resistance to HIV-1
- Type1 autoimmune hepatitis
- ANCA-positive autoimmune disease

Association of Human MHC Alleles and Risk for Diseases

<u>Disease</u>	Associated HLA Allele	Relative Risk**
Ankylosing Spondylitis*	B27	90
Hereditary Hemochromatos	sis A3/B14	90
Insulin Dependent Diabetes	s* DR4/DR3	20
Multiple Sclerosis*	DR2	5
Myasthenia Gravis*	DR3	10
Rheumatoid Arthritis*	DR4	10
Contant Louis Front has a st	!-* DD2	-
Systemic Lupus Erythromat	osis* DR3	5
Narcolonsy	DR2	130
Narcolepsy		
* Autoimmune Disease **Percent of Patients with Allele Divided by Percent of		
Non-Affected Persons with this Allele		